

TD
9/02

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	OT	626007	8/14/00
O.I.P.E. CLASSIFIER	ASD		9/02/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	9/14/00
2	✓	✓	9/14/00
3	✓	✓	9/14/00
4	✓	✓	9/14/00
5	✓	✓	9/14/00
6	✓	✓	9/14/00
7	✓	✓	9/14/00
8	✓	✓	9/14/00
9	✓	✓	9/14/00
10	✓	✓	9/14/00
11	✓	✓	9/14/00
12	✓	✓	9/14/00
13	✓	✓	9/14/00
14	✓	✓	9/14/00
15	✓	✓	9/14/00
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25	✓	✓	9/14/00
26	✓	✓	9/14/00
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28	✓	✓	9/14/00
29	✓	✓	9/14/00
30	✓	✓	9/14/00
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43	✓	✓	9/14/00
44	✓	✓	9/14/00
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46	✓	✓	9/14/00
47	✓	✓	9/14/00
48	✓	✓	9/14/00
49	✓	✓	9/14/00
50	✓	✓	9/14/00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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